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PTO/SB/17 (01-03)

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$750.00)

Complete if Known	
Application Number	09/540,674
Filing Date	3/31/2000
First Named Inventor	Majidi-Ahy
Examiner Name	Smith, S.
Art Unit	2685
Attorney Docket No.	164.1001.01

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METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (Continued)			
<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other		
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<input checked="" type="checkbox"/> Deposit Account					
Deposit Account Number	50-0365				
Deposit Account Name	Swernofsky Law Group PC				
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FEE CALCULATION		3. ADDITIONAL FEES			
1. BASIC FILING FEE		Large Entity Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1) (\$)					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims	-20**=	Extra Claims	Fee from below	Fee Paid	
Independent Claims	-3**=				
Multiple Dependent					
Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)					
** or number previously paid, if greater; For Reissues, see above					
Other fee (specify)					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$750.00)					

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Steven A. Swernofsky	Registration No. (Attorney/Agent)	33,040
Signature	<i>Steven A. Swernofsky</i>	Telephone	650-947-0700
		Date	02-21-2003

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